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APPLICATION NUMBER	FILING OR 371(C) DATE	FIRST NAMED APPLICANT	ATTY. DOCKET NO./TITLE
10/525,115	08/31/2005	Martin Hendrix	Le A 36 230

35969
Bayer Health Care LLC
400 Morgan Lane
West Haven, CT 06516

CONFIRMATION NO. 5580
POWER OF ATTORNEY NOTICE



0000000029473387

Date Mailed: 04/21/2008

NOTICE REGARDING CHANGE OF POWER OF ATTORNEY

This is in response to the Power of Attorney filed 04/13/2008.

- The Power of Attorney to you in this application has been revoked by the assignee who has intervened as provided by 37 CFR 3.71. Future correspondence will be mailed to the new address of record(37 CFR 1.33).

/hgray/

Office of Data Management, Application Assistance Unit (571) 272-4000, or (571) 272-4200, or 1-888-786-0101